

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m-6</i>		<i>2/15/00</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>2/29/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>JB</i>	<i>5222</i>	

Best Available Copy

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
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